Paper Claims Update As of 3/1/08

Paper Claims Backlog Update

Due to conversion to a new data entry contractor, Medicaid has experienced a delay in processing paper claims received after May 1, 2007. Professional claims received and held in storage since that date, including the old paper claim forms, are now being processed, generally with earliest dates processing first.

Medicaid is in final testing for dental claims. The processing of the dental backlog will begin shortly.

Paper Claims - Old vs. New Format

Effective May 1, 2008, Medicaid will reject and return older versions of the CMS-1500 (professional), UB (institutional), and ADA (dental) paper claim forms. The CMS-1500 12/90 form, the UB-92, and the 1994, 1999, 2000, and 2002 ADA dental forms, along with any other similar forms used before the advent of the CMS-1500 08/05, UB-04, and ADA 2006 forms will not be processed.

Medicaid encourages electronic submission of claims. Providers should contact Utah Health Information Network (UHIN) at 801-466-7705 or online at http://health.utah.gov/hipaa and access 'Enrollment'. Refer to the Companion Guides on the Medicaid website at http://health.utah.gov/medicaid for instructions on electronic transactions.

Multiple-page Paper Claims

Effective April 1, 2008, Medicaid will no longer accept multi-page paper professional claims (CMS-1500) or dental claims. If services require more than one claim (6 lines for professional and 18 lines for dental), submit each claim as an individual claim:

- When billing for the Vaccines for Children (VFC) program, bill the appropriate amount of immunizations with the injection code on the same claim.
- When reporting Third Party Liability (TPL), be sure to split the payment appropriately between the claims.
- When submitting medical documentation for any reason, it must be attached to each claim.

Billing and Reporting Third Party Liability (TPL)

Beginning May 1, 2008, Medicaid will require third party liability (TPL) information to be submitted on the claim, whether billing electronically or on paper. It is recommended that you work with your electronic software vendor to add TPL information on your claims. If your software vendor does not allow you to report TPL information, you will need to drop to paper and report the information on the claim.

Medicaid does not key TPL information from an attached Explanation of Benefits (EOB). Only the EOB's submitted for zero payment, or claim denials, will be reviewed. It is necessary to report the TPL amount and patient responsibility for claims to be paid by Medicaid.

For instructions on reporting TPL and other billing information, visit the website at http://health.utah.gov/medicaid/.